

Fill in this information to identify the caseDebtor name Ryan's Electrical Services, LLC.United States Bankruptcy Court for the: NORTHERN DISTRICT OF IOWACase number
(if known) _____☒ Check if this is an
amended filing**Official Form 206A/B****Schedule A/B: Assets -- Real and Personal Property****12/15**

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of
debtor's interest**2. Cash on hand**

3. Checking, savings, money market, or financial brokerage accounts *(Identify all)*

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of
account number3.1. Community State Bank account Checking account _____ \$0.003.2. US Bank checking account Checking account _____ \$30,408.40**4. Other cash equivalents** *(Identify all)*

Name of institution (bank or brokerage firm)

5. Total of Part 1

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$30,408.40**Part 2: Deposits and prepayments****6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.
☒ Yes. Fill in the information below.

Debtor Ryan's Electrical Services, LLC.
Name

Case number (if known) _____

Current value of
debtor's interest

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

7.1. Security deposit on leased premises \$3,750.00

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$3,750.00

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☐ No. Go to Part 4.
☒ Yes. Fill in the information below.

Current value of
debtor's interest

11. Accounts receivable

11a. 90 days old or less: \$423,942.49 — \$20,000.00 = → \$403,942.49
face amount doubtful or uncollectible accounts

11b. Over 90 days old: \$112,962.38 — \$10,000.00 = → \$102,962.38
face amount doubtful or uncollectible accounts

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$506,904.87

Part 4: Investments

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.
☐ Yes. Fill in the information below.

Valuation method
used for current value

Current value of
debtor's interest

14. Mutual funds or publicly traded stocks not included in Part 1

Name of fund or stock:

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity: % of ownership:

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$0.00

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☐ No. Go to Part 6.
☒ Yes. Fill in the information below.

Debtor Ryan's Electrical Services, LLC. Case number (if known) _____
Name

General description	Date of the last physical inventory MM/DD/YYYY	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
Inventory	12/31/2019	\$169,941.51	Auction of materials	\$15,000.00
20. Work in progress				
21. Finished goods, including goods held for resale				
22. Other inventory or supplies				
23. Total of Part 5				\$15,000.00

Add lines 19 through 22. Copy the total to line 84.

24. Is any of the property listed in Part 5 perishable?
☒ No
☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?
☒ No
☐ Yes. Book value _____ Valuation method _____ Current value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?
☒ No
☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming or fishing-related assets (other than titled motor vehicles and land)?
☒ No. Go to Part 7.
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops--either planted or harvested			
29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish			
30. Farm machinery and equipment (Other than titled motor vehicles)			
31. Farm and fishing supplies, chemicals, and feed			
32. Other farming and fishing-related property not already listed in Part 6			
33. Total of Part 6.			\$0.00

Add lines 28 through 32. Copy the total to line 85.

34. Is the debtor a member of an agricultural cooperative?
☐ No
☐ Yes. Is any of the debtor's property stored at the cooperative?
☐ No
☐ Yes

35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?
☐ No
☐ Yes. Book value _____ Valuation method _____ Current value _____

36. Is a depreciation schedule available for any of the property listed in Part 6?
☐ No
☐ Yes

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?
☐ No
☐ Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
Office furniture and equipment: computers, desks, chairs	\$108,040.38	Auction value	\$20,000.00

40. Office fixtures

41. Office equipment, including all computer equipment and communication systems equipment and software

42. **Collectibles** *Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

\$20,000.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☐ No
☒ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.
☒ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1. 2018 Chevy Express			Unknown
47.2. 2019 Chevy Express			Unknown
47.3. 2019 Chevy Malibu			Unknown
47.4. 2019 Chevy Silverado			Unknown
47.5. 2018 Silverado			Unknown
47.6. 2018 Silverado			Unknown
47.7. 2018 Chevy Malibu			Unknown
47.8. (VIN Ending) (Vehicles)			
196 2017 Silveradod C1500			
050 2017 Silverado C1500		Auction	\$25,800.00

Debtor Ryan's Electrical Services, LLC.
Name

Case number (if known) _____

47.9. (VIN Ending) (Vehicles)

256 2012 Chevy Colorado
232 2012 Chevy Colorado
321 2007 Chevy Colorado
435 2009 Chevy Colorado
457 2009 Chevy Colorado
718 2009 Chevy Colorado
107 2005 Chevy Colorado
305 2009 Chevy 2500 Express
204 2008 Chevy Express AWD
309 2005 Ford E250
102 1999 Ford F350

Auction/Market \$26,194.00

47.10. Trailers (6)

Market/Auction \$6,000.00

48. Watercraft, trailers, motors, and related accessories Examples: Boats
trailers, motors, floating homes, personal watercraft, and fishing vessels

49. Aircraft and accessories

50. Other machinery, fixtures, and equipment (excluding farm
machinery and equipment)

3 scissor lifts @\$5,000.00 each
Handtools @ \$7,500.00

Auction value \$22,500.00

51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

\$80,494.00

52. Is a depreciation schedule available for any of the property listed in Part 8?

☐ No
☒ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

☒ No
☐ Yes

Part 9: Real property

54. Does the debtor own or lease any real property?

☒ No. Go to Part 10.
☐ Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$0.00

57. Is a depreciation schedule available for any of the property listed in Part 9?

☐ No
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

☐ No
☐ Yes

Part 10: Intangibles and Intellectual Property**59. Does the debtor have any interests in intangibles or intellectual property?**

- ☒ No. Go to Part 11.
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets			
61. Internet domain names and websites			
62. Licenses, franchises, and royalties			
63. Customer lists, mailing lists, or other compilations			
64. Other intangibles, or intellectual property			
65. Goodwill			

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$0.00**67. Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☐ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☐ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Part 11: All other assets**70. Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☒ Yes. Fill in the information below.

Current value of debtor's interest**71. Notes receivable**

Description (include name of obligor)

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

73. Interests in insurance policies or annuities**74. Causes of action against third parties (whether or not a lawsuit has been filed)****75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims****76. Trusts, equitable or future interests in property****77. Other property of any kind not already listed** *Examples: Season tickets, country club membership*Loan to shareholder Ryan Etten / offset by obligation on capital contributions**\$143,106.67****78. Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$143,106.67

Debtor Ryan's Electrical Services, LLC.
Name

Case number (if known) _____

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	<u>\$30,408.40</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$3,750.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$506,904.87</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$15,000.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$20,000.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$80,494.00</u>	
88. Real property. <i>Copy line 56, Part 9.....</i> →		<div><u>\$0.00</u></div>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	<div><u>\$143,106.67</u></div>	
91. Total. Add lines 80 through 90 for each column.	91a. <div><u>\$799,663.94</u></div>	91b. <div><u>\$0.00</u></div>
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.....		<div><u>\$799,663.94</u></div>

Fill in this information to identify the case:

Debtor Ryan's Electrical Services, LLC.

United States Bankruptcy Court for the: NORTHERN DISTRICT OF IOWA

Case number _____
(if known)

☒ Check if this is an amended filing

Official Form 206E/F**Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☐ No. Go to Part 2.
☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or part.

If more space is needed for priority unsecured claims, fill out and attach the Additional Page of Part 1.

	Total claim	Priority amount
2.1 Priority creditor's name and mailing address		
<u>Alan R. Atwood</u>	<u>\$1,014.66</u>	<u>\$1,014.66</u>
<u>2732 Chicago Ave.</u>		
<u>Des Moines IA 50317</u>		
Date or dates debt was incurred _____		
Last 4 digits of account number _____		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>4</u>)		
As of the petition filing date, the claim is: Check all that apply.		
<input checked="" type="checkbox"/> Contingent		
<input checked="" type="checkbox"/> Unliquidated		
<input type="checkbox"/> Disputed		
Basis for the claim: <u>Accrued Vacation</u>		
Is the claim subject to offset?		
<input checked="" type="checkbox"/> No		
<input type="checkbox"/> Yes		

2.2 Priority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	<u>\$3,750.00</u>	<u>\$3,750.00</u>
<u>Bill J. Mangano</u>	<input checked="" type="checkbox"/> Contingent		
<u>721 First Street</u>	<input checked="" type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
<u>Redfield IA 50233</u>	Basis for the claim: <u>Accrued Vacation</u>		
Date or dates debt was incurred _____	Is the claim subject to offset?		
Last 4 digits of account number _____	<input checked="" type="checkbox"/> No		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>4</u>)	<input type="checkbox"/> Yes		

Part 1: Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim Priority amount

2.3 Priority creditor's name and mailing addressBob W. Mangano1214 Thomas StreetPO Box 79Redfield IA 50233Date or dates debt was incurredLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(5)

As of the petition filing date, the
claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

401(k) Funds Owed

Is the claim subject to offset?

- ☒ No
☐ Yes

\$833.20\$833.20**2.4** Priority creditor's name and mailing addressBob W. Mangano1214 Thomas StreetPO Box 79Redfield IA 50233Date or dates debt was incurredLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(4)

As of the petition filing date, the
claim is: *Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

Accrued Vacation

Is the claim subject to offset?

- ☒ No
☐ Yes

\$153.33\$153.33**2.5** Priority creditor's name and mailing addressBrenden J. Etten5041 Southfork LaneWaterloo IA 50701Date or dates debt was incurredLast 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(5)

As of the petition filing date, the
claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

401(k) Funds Owed

Is the claim subject to offset?

- ☒ No
☐ Yes

\$330.00\$330.00

Part 1: Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

	Total claim	Priority amount
<div style="background-color: black; color: white; padding: 2px; font-weight: bold;">2.6</div> Priority creditor's name and mailing address <u>Brittany L. Finn</u> <u>5041 Southfork Lane</u> <u>Waterloo</u> <u>IA</u> <u>50701</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>5</u>)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>401(k) Funds Owed</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$460.50</u> <u>\$460.50</u>
<div style="background-color: black; color: white; padding: 2px; font-weight: bold;">2.7</div> Priority creditor's name and mailing address <u>Carrie M. Etten</u> <u>5041 Southfork Lane</u> <u>Waterloo</u> <u>IA</u> <u>50701</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>5</u>)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>401(k) Funds Owed</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,861.64</u> <u>\$1,861.64</u>
<div style="background-color: black; color: white; padding: 2px; font-weight: bold;">2.8</div> Priority creditor's name and mailing address <u>Chad M. Malone</u> <u>1501 W. Howard Street</u> <u>Knoxville</u> <u>IA</u> <u>50138</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>5</u>)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>401(k) Funds Owed</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$899.32</u> <u>\$899.32</u>

Part 1: Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2.9 Priority creditor's name and mailing addressChad M. Malone1501 W. Howard StreetKnoxville IA 50138

Date or dates debt was incurred _____

Last 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(4)As of the petition filing date, the
claim is: *Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

401(k) Funds Owed

Is the claim subject to offset?

- ☒ No
☐ Yes

\$474.08\$474.08**2.10** Priority creditor's name and mailing addressChadrick O. Johnson1420 4th StreetNevada IA 50201

Date or dates debt was incurred _____

Last 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(5)As of the petition filing date, the
claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

401(k) Funds Owed

Is the claim subject to offset?

- ☒ No
☐ Yes

\$1,093.65\$1,093.65**2.11** Priority creditor's name and mailing addressChadrick O. Johnson1420 4th StreetNevada IA 50201

Date or dates debt was incurred _____

Last 4 digits of account
number _____Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(4)As of the petition filing date, the
claim is: *Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

Accrued Vacation

Is the claim subject to offset?

- ☒ No
☐ Yes

\$378.40\$378.40

Part 1: Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim Priority amount

2.12 Priority creditor's name and mailing addressCraig A. Zehner6911 NW 84th Ave.Johnston IA 50313Date or dates debt was incurredLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(4)

As of the petition filing date, the
claim is: *Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

Accrued Vacation

Is the claim subject to offset?

- ☒ No
☐ Yes

\$4,846.15\$4,846.15**2.13** Priority creditor's name and mailing addressDennis W. Hammer Jr.7721 N. 95th Ave.Baxter IA 50028Date or dates debt was incurredLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(5)

As of the petition filing date, the
claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

401(k) Funds Owed

Is the claim subject to offset?

- ☒ No
☐ Yes

\$5,266.59\$5,266.59**2.14** Priority creditor's name and mailing addressDennis W. Hammer Jr.7721 N. 95th Avenue W.Baxter IA 50028Date or dates debt was incurredLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(4)

As of the petition filing date, the
claim is: *Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

Accrued Vacation

Is the claim subject to offset?

- ☒ No
☐ Yes

\$1,647.00\$1,647.00

Part 1: Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim Priority amount

2.15 Priority creditor's name and mailing addressDon K. Joradn66670 Hwy 210

As of the petition filing date, the claim is: *Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

Accrued VacationMaxwell IA 50161

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(4)

Is the claim subject to offset?

- ☒ No
☐ Yes

\$3,511.90\$3,511.90**2.16** Priority creditor's name and mailing addressDon K. Jordan66670 Hwy 210

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

401(k) Funds OwedMaxwell IA 50161

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(5)

Is the claim subject to offset?

- ☒ No
☐ Yes

\$5,363.24\$5,363.24**2.17** Priority creditor's name and mailing addressHarley N. Dotzenrod4544 NE McDougal Lane

As of the petition filing date, the claim is: *Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

Accrued VacationAnkeny IA 50021

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(4)

Is the claim subject to offset?

- ☒ No
☐ Yes

\$871.50\$871.50

Part 1: Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2.18 Priority creditor's name and mailing addressJeff. A. Schutte1948 McKimber StreetAs of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

401(k) Funds OwedHarvey IA 50119

Date or dates debt was incurred _____

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(5)

Is the claim subject to offset?

- ☒ No
☐ Yes

\$2,700.97\$2,700.97**2.19** Priority creditor's name and mailing addressJeff. A. Schutte1948 McKimber StreetAs of the petition filing date, the claim is: *Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

401(k) Funds OwedHarvey IA 50119

Date or dates debt was incurred _____

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(4)

Is the claim subject to offset?

- ☒ No
☐ Yes

\$4,197.31\$4,197.31**2.20** Priority creditor's name and mailing addressJerad R. Snyder2121 E. Cauler Ave. #15As of the petition filing date, the claim is: *Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

Accrued VacationDes Moines IA 50320

Date or dates debt was incurred _____

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(4)

Is the claim subject to offset?

- ☒ No
☐ Yes

\$186.08\$186.08

Part 1: Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

		Total claim	Priority amount
2.21 Priority creditor's name and mailing address <u>Joe Squire</u> <u>809 E. 18th Street N</u> <u>Newton</u> <u>IA</u> <u>50208</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>5</u>)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>401(k) Funds Owed</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$4,779.20</u>	<u>\$4,779.20</u>
2.22 Priority creditor's name and mailing address <u>Justin A. Sams</u> <u>2860 NE 51st Court</u> <u>Des Moines</u> <u>IA</u> <u>50317</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>4</u>)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Vacation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$222.25</u>	<u>\$222.25</u>
2.23 Priority creditor's name and mailing address <u>Matthew L. Johnson</u> <u>1608 High View Drive</u> <u>Mt. Vernon</u> <u>IA</u> <u>52314</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>4</u>)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Vacation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$61.87</u>	<u>\$61.87</u>

Part 1: Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

		Total claim	Priority amount
2.24 Priority creditor's name and mailing address Mike Funk 1212 W. Belle Ave. Howards Grove IA 53083 Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>5</u>)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: 401(k) Funds Owed Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$6,298.16</u>	<u>\$6,298.16</u>
2.25 Priority creditor's name and mailing address Oleksandr S. Synytsya 1031 Lisbon Drive Knoxville IA 50138 Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>4</u>)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Accrued Vacation Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1.50</u>	<u>\$1.50</u>
2.26 Priority creditor's name and mailing address Randy L. Lange 1621 North 4th Ave. W Newton IA 50208 Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>5</u>)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: 401(k) Funds Owed Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,118.86</u>	<u>\$1,118.86</u>

Part 1: Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim Priority amount

2.27 Priority creditor's name and mailing addressRandy L. Lange1621 North 4th Ave. WNewton IA 50208Date or dates debt was incurredLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(4)

As of the petition filing date, the
claim is: *Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

Accrued Vacation

Is the claim subject to offset?

- ☒ No
☐ Yes

\$1,012.65\$1,012.65**2.28** Priority creditor's name and mailing addressRyan Etten5041 Southfork LaneWaterloo IA 50701Date or dates debt was incurredLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(5)

As of the petition filing date, the
claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

401(k) Funds Owed

Is the claim subject to offset?

- ☒ No
☐ Yes

\$6,346.12\$6,346.12**2.29** Priority creditor's name and mailing addressScott A. Satterlee1021 Lake Ave.Evansdale IA 50707Date or dates debt was incurredLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(4)

As of the petition filing date, the
claim is: *Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

Accrued Vacation

Is the claim subject to offset?

- ☒ No
☐ Yes

\$3,189.98\$3,189.98

Part 1: Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim Priority amount

2.30 Priority creditor's name and mailing addressScott F. Howell903 Border StreetNew Virginia IA 50210Date or dates debt was incurredLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(5)

As of the petition filing date, the
claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

401(k) Funds Owed

Is the claim subject to offset?

- ☒ No
☐ Yes

\$1,516.80\$1,516.80**2.31** Priority creditor's name and mailing addressScott F. Howell903 Border StreetNew Virginia IA 50210Date or dates debt was incurredLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(4)

As of the petition filing date, the
claim is: *Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

Accrued Vacation

Is the claim subject to offset?

- ☒ No
☐ Yes

\$2,741.67\$2,741.67**2.32** Priority creditor's name and mailing addressTravis B. Clark510 E 17th Street, Apt. 48Newton IA 50208Date or dates debt was incurredLast 4 digits of account
number Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(4)

As of the petition filing date, the
claim is: *Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

Accrued Vacation

Is the claim subject to offset?

- ☒ No
☐ Yes

\$388.35\$388.35

Part 1: Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim Priority amount

2.33 Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$220.80</u>	<u>\$220.80</u>
<u>Vincent S. Tsygipalo</u>	<input checked="" type="checkbox"/> Contingent		
<u>604 N. 7th Street</u>	<input checked="" type="checkbox"/> Unliquidated		
_____	<input type="checkbox"/> Disputed		

<u>Chariton</u> <u>IA</u> <u>50049</u>	Basis for the claim:		
Date or dates debt was incurred	<u>Accrued Vacation</u>		
_____	Is the claim subject to offset?		
Last 4 digits of account number _____	<input checked="" type="checkbox"/> No		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>4</u>)	<input type="checkbox"/> Yes		

2.34 Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$115.75</u>	<u>\$115.75</u>
<u>Zachary B. Allen</u>	<input checked="" type="checkbox"/> Contingent		
<u>1801 W. Wahkonsa Ave.</u>	<input checked="" type="checkbox"/> Unliquidated		
_____	<input type="checkbox"/> Disputed		

<u>Polk City</u> <u>IA</u> <u>50226</u>	Basis for the claim:		
Date or dates debt was incurred	<u>Accrued Vacation</u>		
_____	Is the claim subject to offset?		
Last 4 digits of account number _____	<input checked="" type="checkbox"/> No		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>4</u>)	<input type="checkbox"/> Yes		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If more space is needed for nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <u>\$243,764.87</u>
		Check all that apply.
		<input type="checkbox"/> Contingent
		<input type="checkbox"/> Unliquidated
		<input type="checkbox"/> Disputed
		Basis for the claim:
		--
		Is the claim subject to offset?
		<input checked="" type="checkbox"/> No
		<input type="checkbox"/> Yes

Van G. Miller	
Family Charitable Foundation	
c/o Beecher Law Firm	
620 Lafayette Street, PO Box 178	
Waterloo	IA 50704
Date or dates debt was incurred	
Last 4 digits of account number	

Part 4:

Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

		Total of claim amounts
5a. Total claims from Part 1	5a.	\$67,853.48
5b. Total claims from Part 2	5b. +	\$243,764.87
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.	\$311,618.35

Fill in this information to identify the case:Debtor Name Ryan's Electrical Services, LLC.United States Bankruptcy Court for the: NORTHERN DISTRICT OF IOWA

Case number (if known): _____

☒ Check if this is an amended filingOfficial Form 206Sum**Summary of Assets and Liabilities for Non-Individuals**

12/15

Part 1: Summary of Assets**1. Schedule A/B: Assets--Real and Personal Property** (Official Form 206A/B)

1a. Real property: Copy line 88 from Schedule A/B.....	<u>\$0.00</u>
1b. Total personal property: Copy line 91A from Schedule A/B.....	<u>\$799,663.94</u>
1c. Total of all property Copy line 92 from Schedule A/B.....	<u>\$799,663.94</u>

Part 2: Summary of Liabilities**2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D..... \$1,012,975.02**3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of Schedule E/F.....	<u>\$67,853.48</u>
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F.....	<u>+ \$243,764.87</u>

4. Total liabilitiesLines 2 + 3a + 3b..... \$1,324,593.37

Fill in this information to identify the case and this filing:Debtor Name Ryan's Electrical Services, LLC.United States Bankruptcy Court for the: NORTHERN DISTRICT OF IOWACase number _____
(if known)Official Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets--Real and Personal Property* (Official Form 206A/B)
- ☐ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☐ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *A Summary of Assets and Liabilities for Non-Individuals* (Official Form 206-Summary)
- ☐ Amended Schedule _____
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 05/15/2020
MM / DD / YYYY

X /s/ Ryan Etten
Signature of individual signing on behalf of debtor

Ryan Etten
Printed name

Ryan Etten
Position or relationship to debtor

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF IOWA
WATERLOO DIVISION**

IN RE: **Ryan's Electrical Services, LLC.**

CASE NO.

CHAPTER **11**

Certificate of Service

I hereby certify that on the date reflected on this filing, the foregoing instrument was filed electronically with the Clerk of Court using the CM/ECF system which sent notification of such filing to all registered users party to this case.

/s/ Robert C. Gainer